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Bib Data Sheet

CONFIRMATION NO. 9174

SERIAL NUMBER 10/035,039	FILING DATE 12/28/2001  RULE	CLASS 375	GROUP ART UNIT 2631	ATTORNEY DOCKET NO. CR00312M(72464)
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## APPLICANTS

Brian K. Classon, Palatine, IL;

Philippe J. Sartori, Algonquin, IL;

Vijay Nangia, Schaumburg, IL; Xiangyang Zhuang, Hoffman Estates, IL;

Kevin L. Baum, Rolling Meadows, IL;

\*\* CONTINUING DATA \*\*\*\*\* NO

KCT

\*\* FOREIGN APPLICATIONS \*\*\*\*\* NO

KCT

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 02/06/2002

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY IL	SHEETS DRAWING 8	TOTAL CLAIMS 37	INDEPENDENT CLAIMS 4
Verified and Acknowledged	Examiner's Signature <i>Khankhong Tran</i> Initials KCT				

## ADDRESS

22242

FITCH EVEN TABIN AND FLANNERY

120 SOUTH LA SALLE STREET

SUITE 1600

CHICAGO, IL

60603-3406

## TITLE

Adaptive transmission method

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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